2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069924

BAILEY, CHAD A

BRADENTON, FL 34206

PO BOX 9496

Name: Address:

City-St-Zip:

Entity Name: SUNCOAST ACCOUNTING & TAX, INC.

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4910 14TH STREET WEST SUITE 104 BRADENTON, FL 34207 **New Mailing Address: Current Mailing Address:** 4910 14TH STREET WEST PO BOX 9496 SUITE 104 BRADENTON, FL 34206 BRADENTON, FL 34207 FEI Number: 20-4990225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BAILEY, CHAD A BAILEY, CHAD A 4910 14TH STREET WEST 4910 14TH STREET WEST BRADENTON, FL 34207 SUITE 104 BRADENTON, FL 34207 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: CHAD BAILEY 03/03/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BAILEY, CHAD A Name: Name: PO BOX 9496 Address: Address: City-St-Zip: BRADENTON, FL 34206 City-St-Zip: Title: Title: () Delete () Change () Addition BAILEY, CRYSTAL L Name: Name: PO BOX 9496 Address: Address: BRADENTON, FL 34206 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SPRANG, BARBARA J Name: Name: PO BOX 9496 Address: Address: City-St-Zip: BRADENTON, FL 34206 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CHAD BAILEY **PRES** 03/03/2009